FORM D

UNITED STATES
SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549

UNIFORM LIMITED OFFERING EXEMPTION

FORM D

NOTICE OF SALE OF SECURITIES
PURSUANT TO REGULATION D,
SECTION 4(6), AND/OR

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OMB APPR	OVAL 1						
OMB Number:	3235-0076						
Expires:							
Estimated average burden							
hours per respon	se16.00						

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SEC US	E ONLY					
Prefix	Serial					
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DATE RECEIVED						
1						

Name of Offering (check if this is an amendment and name has changed, and indicate change.)	95
Pacific Rock Partners, L.P.	
Filing Under (Check box(es) that apply): Rule 504 Rule 505 Rule 506 Section 4(6)	ULOE SOUTH
Type of Filing: New Filing Amendment	Section
	70-
A. BASIC IDENTIFICATION DATA	JUI 942000
1. Enter the information requested about the issuer	***************************************
Name of Issuer (check if this is an amendment and name has changed, and indicate change.)	Markingian, DC
Pacific Rock Partners, L.P.	101 4 G
Address of Executive Offices (Number and Street, City, State, Zip Code)	Telephone Number (Including Area Code)
1935 Pariva Drive, Cardiff by the Sea, CA 92007	(760) 613-6856
Address of Principal Business Operations (Number and Street, City, State, Zip Code) (if different from Executive Offices)	Telephone Number (Including Area Code)
Brief Description of Business	
Private investment partnership	
Type of Business Organization	
corporation I limited partnership, already formed other (p	please s
business trust limited partnership, to be formed	08062738
Month Year	00002100
Actual of Estimated Safe of Interpretation of Segment 1970	nated
Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for State	
CN for Canada; FN for other foreign jurisdiction)	DE

GENERAL INSTRUCTIONS

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 774(6).

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

- ATTENTION -

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predictated on the filing of a federal notice.

A. BASIC IDENTIFICATION DATA										
2. Enter the information requested for the following:										
• Each promoter of the issuer, if the issuer has been organized within the past five years;										
• Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer.										
• Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and										
• Each general and managing partner of partnership issuers.										
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner										
Full Name (Last name first, if individual) Pacific Rock Capital, LLC										
Business or Residence Address (Number and Street, City, State, Zip Code) 1935 Pariva Drive, Cardiff by the Sea, CA 92007										
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner										
Full Name (Last name first, if individual) Christopher Donnelly										
Business or Residence Address (Number and Street, City, State, Zip Code)										
1935 Pariva Drive, Cardiff by the Sea, CA 92007										
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner										
Full Name (Last name first, if individual)										
Business or Residence Address (Number and Street, City, State, Zip Code)										
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner										
Full Name (Last name first, if individual)										
Business or Residence Address (Number and Street, City, State, Zip Code)										
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner										
Full Name (Last name first, if individual)										
Business or Residence Address (Number and Street, City, State, Zip Code)										
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner										
Full Name (Last name first, if individual)										
Business or Residence Address (Number and Street, City, State, Zip Code)										
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner										
Full Name (Last name first, if individual)										
Business or Residence Address (Number and Street, City, State, Zip Code)										

B. INFORMATION ABOUT OFFERING													
1. Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering?							Yes ⋉	No					
ι.	1. Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering?							<u> </u>	L				
2.									\$_100,000.00				
,									Yes	No			
	 Does the offering permit joint ownership of a single unit? Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any 								×				
4. Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer only.													
Ful N/	-	Last name	first, if indi	vidual)									
		Residence	Address (N	umber and	i Street, Ci	ity, State, Z	ip Code)		<u></u>	<u> </u>	 -		
No	me of Acc	ociated Pr	oker or Dea	aler		·, · · · · · · · · · · · · · · · · · ·							
1 N d	or 1422		OACI OI DCI										
Sta			Listed Has										Ctotas
	(Check	"All States	or check	individual	States)		*****************	••••				☐ All States	
	AL	AK	AZ	AR	CA	CO	CT	DE	DC	FL MI	GA MÑ	HI MS	ID MO
	IL MT	NE NE	IA NV	KS NH	KY NJ	LA NM	ME NY	MD NC	MA ND	OH)	OK)	OR	PA
	RI	SC	SD	TN	TX	UT	\overline{VT}	VA	WA	WV	WI	WY	PR
Fu	Il Name (I	Last name	first, if indi	ividual)					·· <u>·</u> ··				<u> </u>
Bu	siness or	Residence	Address (?	Number an	d Street, C	City, State, 2	Zip Code)		<u></u>	,			
Na	me of Ass	sociated Br	oker or De	aler		,				=			
Sta	ates in Wh	ich Person	Listed Has	Solicited	or Intends	to Solicit	Purchasers						
	(Check	"All States	s" or check	individual	States)				***************************************			☐ All States	
	AL	AK	AZ	AR	ÇA	CO	CT	DE	DC	FL	GA	HI	ID
	IL	IN NE	IA NV	KS	KY	LA	ME NY	MD NC	MA ND	MI OH	MN OK	MS OR	MO PA
	MT RI	NE SC	NV SD	NH TN	NJ TX	NM UT	VT	VA	WA	WV	WI	WY	PR
Fu			first, if indi										
<u></u>	cinece o-	Recidence	Address	Vumber on	d Street C	ity State	Zin Codel						
Business or Residence Address (Number and Street, City, State, Zip Code)													
Name of Associated Broker or Dealer													
States in Which Person Listed Has Solicited or Intends to Solicit Purchasers													
(Check "All States" or check individual States)								l States					
	AL	AK	AZ	AR	CA	CO	CT	DE	DC	FL	GA	HI	ID
	IL MT	IN NE	IA NV	KS NH	KY NJ	LA NM	ME NY	MD NC	MA ND	МI ОН	MN OK	MS OR	MO PA
	RI	SC	SD	TN	TX	UT	VT	VA	WA	WV	WI	WY	PR

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if the answer is "none" or "zero." If the transaction is an exchange offering, check this box [] and indicate in the columns below the amounts of the securities offered for exchange and		
	already exchanged.	4	America Alexander
	Type of Security	Aggregate Offering Price	Amount Already Sold
	Debt)	\$
	Equity	<u></u>	\$
	Common Preferred		0.00
	Convertible Securities (including warrants)	0.00	\$
	Partnership Interests	100,000,000.00	\$ 675,000.00
	Other (Specify	0.00	\$_0.00
	Total	100,000,000.00	§ 675,000.00
	Answer also in Appendix, Column 3, if filing under ULOE.		
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."	Number Investors	Aggregate Dollar Amount of Purchases
	Accredited Investors	-	\$ 600,000.00
	Non-accredited Investors		\$ 75,000.00
	Total (for filings under Rule 504 only)		\$
	Answer also in Appendix, Column 4, if filing under ULOE.		Ψ
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C — Question 1.		
		Type of	Dollar Amount
	Type of Offering	Security	Sold
	Rule 505		\$
	Regulation A		\$
	Rule 504		\$
	Totai		\$ 0.00
4	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the insurer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.		
	Transfer Agent's Fees		\$
	Printing and Engraving Costs		\$
	Legal Fees		\$
	Accounting Fees		\$
	Engineering Fees		\$
	Sales Commissions (specify finders' fees separately)		\$
	Other Expenses (identify)		\$
	Total		§ 0.00

	b. Enter the difference between the aggregate offeri and total expenses furnished in response to Part C	Question 4.a. This difference is the "adjusted gro	ss	100,000,000.0
5.	Indicate below the amount of the adjusted gross pro each of the purposes shown. If the amount for any check the box to the left of the estimate. The total of proceeds to the issuer set forth in response to Part	ceed to the issuer used or proposed to be used for purpose is not known, furnish an estimate and the payments listed must equal the adjusted groups.	or Id	\$
			Payments to Officers, Directors, & Affiliates	Payments to Others
	Salaries and fees		🗌 \$ 0.00	<u> </u>
	Purchase of real estate		🗆 \$ 0.00	s 0.00
	Purchase, rental or leasing and installation of mac and equipment		_	\$
	Construction or leasing of plant buildings and faci	litics	🗆 \$ <u>0.00</u>	\$ 0.00
	Acquisition of other businesses (including the value offering that may be used in exchange for the asset issuer pursuant to a merger)	ts or securities of another	🗆 \$ <u></u>	\$0.00
	Repayment of indebtedness		🗆 💲 0.00	\$ 0.00
	Working capital		┌┐\$ 0.00	\$_0.00
	Other (specify): Estimated Management Fee, w	hich is based on a percentage of the assets	\$ 10,125.00	\$ 664,875.00
	(1.5% annually); Performance Fee may also be	charged but is not included in estimate becau	S -	
	of contingent nature of fee. Investment Capital.		🔲 \$. 🗆 \$
	Column Totals		\$_10,125.00	\$_664,875.00
	Total Payments Listed (column totals added)			75,000.00
Г		D. FEDERAL SIGNATURE		
sig	s issuer has duly caused this notice to be signed by the nature constitutes an undertaking by the issuer to fur information furnished by the issuer to any non-acci	nish to the U.S. Securities and Exchange Comm	nission, upon writte	ale 505, the followin on request of its staf
Iss	uer (Print or Type)	Signature Signature	Date	
Pa	cific Rock Partners, L.P.	AG/	October 7, 2008	3
Na	ne of Signer (Print or Type)	Title of Signer (Print or Type)		
Na	lya Marinin	Administrator for Pacific Rock Partners, L.P	•	

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

- ATTENTION -